

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		12/08/99
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	12-16-99
FORMALITY REVIEW	<i>[Signature]</i>	600125	1/15/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
+	Restricted	O	Objected

Best Available Copy

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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